STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Fiserv Corp. P	AC			
ADDRESS (number and s	4411 E. Jones Brid	ge Road		
(Check if address is changed)	Norcross			30092 -
		CITY▲	STATE▲	ZIP CODE 📤
COMMITTEE'S E-MAI (Check if address is changed)	L ADDRESS (Please provide only one brenda.potter@fise			
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0.7	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA4. IS THIS STATEM		C C00378166 X AMENDED (A)	
I certify that I have examine Type or Print Name of	ned this Statement and to the best of my ki	nowledge and belief it is true, corre	ect and complete	
Signature of Treasurer	Electronically Filed by Brenda ,	Potter	Date 0,7	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information m	nay subject the person signing this	•	
Office Use Only		For further informat Federal Election Con Toll Free 800-424-95	nmission 530	FEC FORM 1 (Revised 02/2009)